

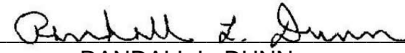
October 15, 2012

Clerk, U.S. Bankruptcy Court

## IT IS ORDERED AND NOTICE IS GIVEN THAT:

(a) The trustee is authorized to compensate the debtor's attorney in the amount requested below without further notice or order if copies are timely served per (b) unless, within 30 days of the "FILED" date, a party files a written objection that sets forth specific grounds for it, with the Clerk of Court, 1001 SW 5th Ave #700, Portland OR 97204. If the amount requested includes fees for work necessary to complete the case, and payment of such fees will have any impact on creditor distributions, the trustee is authorized to compensate the attorney in the amount requested for work necessary to complete the case 21 days after an itemized bill for the additional work is filed and a copy is served on the debtor unless, within 14 days after service, a written objection is filed.

(b) The applicant must comply with all provisions in the court's Notice to Serve Document(s), and must BOTH (1) properly serve a copy of this document, AND (2) FILE a completed "Certificate of Service" using a copy of this document (WITHOUT any attachments).



RANDALL L. DUNN  
U.S. Bankruptcy Judge

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF OREGON

In re )  
 ) Case No. \_\_\_\_\_  
 )  
 ) [ONLY FOR CHAPTER 13 CASES]  
 ) APPLICATION BY DEBTOR'S ATTORNEY  
Debtor(s) ) FOR SUPPLEMENTAL COMPENSATION

I, the undersigned debtor's attorney, whose address and phone number are \_\_\_\_\_, apply for additional compensation from the debtor's estate for the period from \_\_\_\_\_ to \_\_\_\_\_ in the sum of \$\_\_\_\_\_ (which is not less than \$500 unless this is a final application, and which, if this is a final application, includes \$\_\_\_\_\_ in anticipated additional fees to complete the case), per the attached itemized billing summary.

## I CERTIFY THAT:

1. This (**Check One**) IS IS NOT my final application for compensation in this case.
2. I have previously been awarded a total of \$\_\_\_\_\_. If granted, the total approved compensation amount will be \$\_\_\_\_\_.

3. My Disclosure of Compensation shows the debtor(s) and I agreed to Schedule 2.
4. My previous application for compensation (i.e., either the original compensation disclosure or a supplemental application) was filed on \_\_\_\_\_, which is more than six months from the date of this application unless this is my final application.
5. **Allowance of this application will require that the distribution to creditors be reduced, the debtor pay more, or a combination of the two. Even if the distribution to creditors is not reduced, payments to creditors may be delayed**, sometimes for an extended period. If the debtor must pay more, the debtor will either be required to make additional or increased plan payments. If you want to know what impact the allowance of this fee application will have on you, you should contact the attorney whose contact information is above. The attorney is required to explain the impact on you of the allowance of the additional compensation within seven days after you request the information.
6. Applicant will file a modified plan within 28 days of allowance of the compensation requested in this application if the allowance will otherwise require plan modification.
7. Applicant declares that, except as explained below, the minimum time billed is not in increments that exceed .1 hour (6 minutes), and that any time spent working on multiple matters concurrently has been allocated between those matters so that total billings do not exceed the actual time spent:

DATE: \_\_\_\_\_

\_\_\_\_\_  
Debtor's Attorney

**STOP: BEFORE SERVING COPIES, FILE THE MOTION TO OBTAIN A JUDGE'S ORDER!**

### **CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ a copy of this application and order thereon (without attachments unless the order requires service of an economic impact statement on the debtor), and any Notice of Hearing prepared by the court per the judge's order, were served on the debtor, and, if amounts requested and anticipated exceed \$1,000, on all creditors who filed claims and entities that filed a request to receive all case notices.

\_\_\_\_\_  
Signature & Relation to Applicant